

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	7531	C2-9-00
O.I.P.E. CLASSIFIER		L	7/1-00
FORMALITY REVIEW	XB	65373	7/1-00
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final Original	Date	Claim	Final Original	Date	Claim	Final Original	Date
1	✓	✓	51			101		
2	✓	0	52			102		
3	✓	0	53			103		
4	✓	0	54			104		
5	✓	✓	55			105		
6	✓	✓	56			106		
7	✓	✓	57			107		
8	✓	✓	58			108		
9	✓	✓	59			109		
10	✓	✓	60			110		
11	✓	✓	61			111		
12	✓	✓	62			112		
13	✓	✓	63			113		
14	✓	✓	64			114		
15	✓	✓	65			115		
16	✓	✓	66			116		
17	✓	✓	67			117		
18	✓	0	68			118		
19	✓	0	69			119		
20	✓	0	70			120		
21	✓	✓	71			121		
22	✓	✓	72			122		
23	✓	✓	73			123		
24	✓	✓	74			124		
25	✓	✓	75			125		
26	✓	✓	76			126		
27			77			127		
28			78			128		
29			79			129		
30			80			130		
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43			93			143		
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45			95			145		
46			96			146		
47			97			147		
48			98			148		
49			99			149		
50			100			150		

If more than 150 claims or 10 actions  
staple additional sheet here

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